

# Undergraduate Research Position in Cybersecurity – Application Form

## Documentation Checklist

Submit the following documents to [onrproject@mailbox.sc.edu](mailto:onrproject@mailbox.sc.edu) (subject line: onr-application):

1. This completed application form
2. Unofficial transcript

## Criteria Eligibility

1. U.S. citizen
2. Currently enrolled in a major offered by the College of Engineering and Computing
3. Submit an application form and transcript
4. Good standing
5. Applicant must have passed one basic programming course and at least one of the following courses (note: if you did not take any of the courses below, but have the equivalent knowledge and skills, you are welcome to apply):
  - ITEC 245: Introduction to Networks
  - ITEC 293: Cyberoperations
  - ITEC 445: Advanced Networking
  - ITEC 493: IT Security for Managers

Students from majors in the College of Engineering and Computing (CEC), National Guard, ROTC, and veterans are encouraged to apply.

## Applicant Information

1. Name (Last Name, First Name, Middle): \_\_\_\_\_
2. Program of Studies: \_\_\_\_\_
3. Email: \_\_\_\_\_
4. Phone number: \_\_\_\_\_
5. Mailing address: \_\_\_\_\_

## Questions

1. Are you currently working outside of school?
  - a. If Yes, how many hours per week? \_\_\_\_\_
2. What is your current GPA? \_\_\_\_\_
3. If awarded, you confirm that you will submit all the documentation requested to you by your mentor, including at least: (a) Powerpoint slide poster; (b) detailed report of your research project

- a. Yes \_\_\_\_\_
- b. No \_\_\_\_\_
  
- 4. If awarded, you confirm that you will showcase your project during the Research Symposium organized by the Department of Integrated Information Technology
  - a. Yes \_\_\_\_\_
  - b. No \_\_\_\_\_
  
- 5. If awarded, you confirm that you will permit UofSC to include your name on the website of this project.
  - a. Yes \_\_\_\_\_
  - b. No \_\_\_\_\_
  
- 6. Are you a veteran?
  - a. Yes \_\_\_\_\_
  - b. No \_\_\_\_\_
  
- 7. Are you an ROTC student?
  - a. Yes \_\_\_\_\_
  - b. No \_\_\_\_\_

### Demographic Information

We strongly encourage you to fill out the following demographic information that will be kept confidential and will be used only for statistical and reporting purposes.

- Date of Birth (mm/dd/yyyy): \_\_\_\_\_
- Gender:
  - \_\_\_\_\_ Male
  - \_\_\_\_\_ Female
- Race:
  - \_\_\_\_\_ American Indian/Alaskan Native other
  - \_\_\_\_\_ Asian
  - \_\_\_\_\_ Black or African American
  - \_\_\_\_\_ Caucasian
  - \_\_\_\_\_ Native Hawaiian or Pacific Islander
- Ethnicity:
  - \_\_\_\_\_ Hispanic or Latino
  - \_\_\_\_\_ Other